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PATENT APPLICATION TRANSMITTAL Conty for new monprovisional against of 1985, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attorney Docket No. [503.34897CC3] Attorney Docket No. [503.34897CC3]

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See MPEP chapte	LICATION ELEMENTS or 600 concerning utility patent	application contents.	ADDRESS	TO: Box Paten	Commissioner for Patents OC t Application			
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Name (Pnnt/T)	Alan E. Schriavel	li	Registration No.	(Altorney/Agent)	32,087			

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FEE TRANSMITTAL	Complete if Known						
	Application Number						
for FY 2000	Filing Date	April 20, 2001					
Patent fees are subject to annual revision.	First Named Inventor	Katsumi Mabuchi					
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examiner Name	Shulman, M.					
See 37 C.F.R. §§ 1.27 and 1.28.	Group / Art Unit	3744					
TOTAL AMOUNT OF PAYMENT (\$)710.00	Attorney Docket No.	503.34897CC3					

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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)								
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107 480 207 240 Plant filing fee	120	300	220	150	Filing	a brief in s	upport of an	appeal	0.00
108 690 208 345 Reissue filing fee	121	260	221	130		est for oral	-		0.00
114 150 214 75 Provisional filing fee	138	1,510	138	1,510				se proceeding	0.00
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102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149	690	249	345	For e	ach addition	nal invention R§ 1.129(b)	to be	0.00
109 78 209 39 ** Reissue independent claims over original patent	~					,		••	
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SUBMITTED BY		Regist					Complete (ii	f applicable)	
Name (Print/Type) Alan E. Schiavelli			ration i y/Ageni		32,0	87	Telephone	703-312-	6600

Date 4-20-01

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